First Postoperative Visit for

REVERSE

TOTAL SHOULDER REPLACEMENT SURGERY

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What to expect at this visit:

The first visit after surgery is to make sure that you are doing well and that all of your questions are answered. Today we will examine your shoulder and remove your staples. It will also be necessary to get an X-ray of your shoulder today. For your examination, the doctor will need to see your whole upper extremity, so women will need to be in a shoulder gown and men will have to remove their shirts.

First, the doctor will check your incision and examine your arm. You should have good motion of your elbow, wrist, and fingers with little swelling. Let the doctor know if you have any areas of tingling or numbness. Most patients with a reverse prosthesis are not allowed to perform motion exercises on the shoulder until the first postoperative visit, so you should do these only if instructed today by the doctor.

What should you do for pain?

Pain relief after surgery is very important and you should discuss it with the doctor. You should take medication as needed for pain. You need to be comfortable enough to move your fingers, wrist, and elbow several times a day so that they do not get stiff. It also important to inform the doctor today if you will need refills of your pain medications before your next visit. Oftentimes the medicine you were given when you left the hospital is too strong as your pain improves, so a prescription can be written for a pain medicine that is not as strong.

Another way to keep the pain down is to use an anti-inflammatory medication, such as ibuprofen, naproxen or other arthritis medicines. You should not use these medicines if you have a history of ulcers, peptic ulcer disease, kidney disease, liver disease or if you are on blood thinners. If these tend to upset your stomach, or if you are on blood thinners, newer anti-inflammatory
medicines such as Celebrex may be an option. It is preferable that your primary care physician monitor the use of these newer anti-inflammatory medications, especially if you have a history of heart disease.

Ultram is another option for pain relief. This medication generally has milder side effects than the narcotics, but may give better pain relief than the anti-inflammatory medicines.

Lastly, the ice device you were given will continue to help with your pain. We recommend that you use it at least two to three hours a day for the first three to four weeks after surgery. It may still be helpful to wear it at night, and some patients find that they sleep better when wearing it. You should use it as long as you find it helpful, and there is no harm using it for many hours a day. It can also be helpful to use it after doing your exercises/stretching.

**What about my brace?**

Since every surgery for a reverse prosthesis involves many variables, the type of brace you will be given depends upon your specific needs after the surgery. Most patients will receive a white shoulder immobilizer, but some will receive a large pillow (blue abduction pillow) or a brace that holds the arm to the side. Make sure that you are clear about the instructions for the use of your brace after this office visit.

**White Shoulder Immobilizer**

You should use your brace as much as you need for comfort. We recommend that you use it if outdoors where you may get bumped, and at night for the first six weeks after surgery. If you are a fitful sleeper, we recommend that you use it for the first eight weeks after surgery. **It is important to place a pillow behind your elbow when sitting or sleeping for the first 6 to 8 weeks after surgery.** You do not want your elbow to fall back behind your body, because that is the position that the prosthesis could dislocate.

You do not need to wear the brace during the day if you are sitting with your elbow supported by a pillow, or are just walking around the house. Make sure that you keep the elbow in front of your body if you go without your brace. Unless instructed to do so, you should not be wearing your brace at all times. It is important to use your arm at table top level, not lifting anything heavier than a coffee cup, to avoid getting too stiff and keep your swelling down. When using the brace you should wear it over your clothes, so that your skin does not become irritated. Some patients prefer the sling during the day, but we recommend that you use the white immobilizer brace at night for the first six weeks after the surgery.

**Blue Abduction Pillow**

You should wear the brace at all times until told otherwise. If you are in this type of brace we do not want your arm to come down to the side of your body for 6 to 8 weeks. Do not stop using the brace unless we say that it is OK. It is important that when putting on clothes or getting in the shower that someone hold your arm up and away from your body as if the pillow were still on your body. When in the brace you should perform motion exercises of your fingers, wrist and elbow at least 3 to 4 times a day. You can do this without taking the brace off. It is important that
your arm be placed in the brace so that your elbow is in front of your body. If the brace is sliding so that your elbow is falling back, then we recommend adjusting the and sitting and sleeping with a pillow behind your elbow to support it.

**What about showering or bathing?**

You should not get your incision wet for five days after surgery. After that you can take a shower and get the incision wet but you cannot soak the wound (so no baths or hottubs). We do not recommend soaking the incision area until 6 weeks after your surgery. Once you are cleared to bend over and let the arm hang, then at that time you can begin using deodorant in your axilla (armpit). Do not get deodorant on your incision.

It is important that you keep your axillary area dry. We recommend you place a washcloth in your armpit until you are able to keep it clean and dry.

If you have a blue abduction pillow, you may find it easier to wash using a washcloth. If you get into a shower you will need someone to support your arm while you are out of the brace. We recommend you keep a washcloth in your axilla to keep it dry.

**What can I do with my shoulder?**

What you can and cannot do depends on the details of your particular surgery. Generally, it is all right for you to move your shoulder under your own power to reach to write, type, use a computer, read a book, feed yourself, to hold a newspaper and to reach out in front of you. **Do not** lift anything heavier than a cup of coffee for the first 6 weeks after your surgery. It is particularly important that you not reach behind you, or out to the side away from your body, for at least 3 months after your surgery. **Do not** use the arm to push off with to assist yourself getting out of a chair or bed for at least 3 months after surgery.

**When should I start therapy?**

Generally for a reverse prosthesis, formal physical therapy is not needed. After a reverse prosthesis, no one gets formal physical therapy for at least 12 weeks after their surgery. This is because this amount of time is required to let the socket bone heal into the screws we placed there. Once you are at least 12 weeks out from your surgery date, we will discuss with you whether or not formal physical therapy is needed or not. Many patients eventually regain their range of motion without physical therapy, but this is determined on a case by case basis.

You should move and stretch your fingers, wrist, and elbow at least 3 to 4 times a day. The doctor will discuss with you today whether you may or may not do pendulum exercises from now on. If you are instructed to begin doing them, they will be demonstrated to you today.

**When can I drive?**

It is generally a good policy not to drive your car until you can drive normally. There are several
reasons for this. First, you do not want to be in a situation where you need to control the wheel but cannot because of your shoulder. That could lead to a bad problem for you or for someone else. Secondly, the last thing you need is to be in an accident and injure your shoulder or damage the repair. There are no hard and fast rules as to when you should or should not drive, but generally it takes at least a couple of months after this surgery before patients can drive well.

What about work?

Generally the recovery from a reverse prosthesis is slower than the standard total joint arthroplasty. As a result, unless you have to work, we recommend that the shoulder not see much stress until about 6 weeks after surgery. After this visit we will tell you what you can and cannot do, and usually after this visit we will allow you to begin using the arm to feed yourself, to read a book, use a computer or write. We do not recommend that you use the arm over your head level unless we tell you that it is OK to begin this activity.

Whether you can return to work or not depends entirely upon what you do for a living. The same is true for activities that you do for fun or exercise. If you do “white collar work” or “sedentary” work which involves paperwork or working at desktop level, then we recommend that you return to work around one to two weeks after surgery. We recommend that you do not lift anything heavier than a coffee cup for the first 6 weeks after surgery. If you have an occupation or work which requires any lifting at all (such as over a few pounds), then we recommend that you wait a minimum of three months after the surgery. Generally you can begin walking for exercise within two weeks after surgery, but you should wear a sling or brace and ice your shoulder when you are done. We do not recommend exercise bicycling for three to four weeks after surgery, and even then we recommend that you use a sling or your brace so that you do not use or injure the arm. Putting a golf ball is OK four to six weeks after surgery but we do not recommend chipping or driving until around four to six months after your surgery.

When should my next doctor visit be?

Usually we will see you back in 3 to 6 weeks after this visit to monitor your progress and to obtain a radiograph or X-ray of your shoulder. At each visit we will discuss your activity level and determine when your activity can increase. With the reverse prosthesis, we generally obtain radiographs or X-rays each month for the first three months after surgery.

What should I avoid?

There are several things that you should avoid after you have a reverse prosthesis. The major problem after reverse total shoulder replacement is instability (where the components dislocate). This is known to happen when the arm gets into a position where the elbow is behind the body and the arm is in external rotation (a motion like reaching out to the side or behind the back). As a result, it is important to keep a pillow behind your elbow when sleeping or sitting. You should at all times try to keep your elbow in front of your body. You should not use the arm to get out of a chair or out of bed for at least 3 months after your surgery.

We also recommend you do not pick up anything heavier than a coffee cup for the first six to
eight weeks after surgery. Heavy objects can pull on or distract the arm and can result in pain or it can pull the prosthesis apart and dislocate it.

If you have any concerns please contact the office at 410-583-2850.